



NOV-17-2005 THU 04:40 PM

FAX NO.

P. 01

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Fax Transmission

Date: November 17, 2005

To: Commissioner of Patents – ISSUE FEE	From: Kathy Manke
Fax No.: 571-273-2885	Our Ref.: OTTR.01USC1
Application Serial No.: 10/645,439	Fax No.: <u>(970) 492-1101</u>
Examiner: Anthony Q. Edwards	Phone No.: <u>(970) 492-1100</u>
Art Unit: 2835	Total Pages: 6 (Inc. cover sheet)
Confirmation No. 791	
Customer No. 27479	
Atty. Docket No. OTTR.01USC1	

Message:

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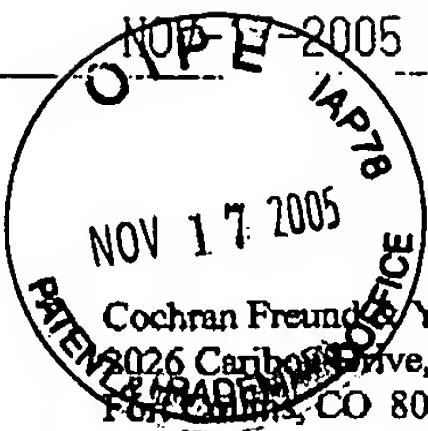
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FAX NO.

P. 02



Cochran Freund & Young LLC
3026 Caribou Drive, Suite 201
Fort Collins, CO 80525

PATENT APPLICATION

DOCKET NO.: OTTR01USC1

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Curtis R. Richardson et al.

Application No.: 10/645,439

Examiner: Anthony Q. Edwards

Filing Date: 8/20/2003

Group Art Unit: 2835

Title: PROTECTIVE MEMBRANE FOR TOUCH SCREEN DEVICE

MAIL STOP ISSUE FEE
COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- | | |
|---|---|
| <input type="checkbox"/> Response/Amendment | <input type="checkbox"/> Petition to extend time to respond |
| <input type="checkbox"/> New fee as calculated below | <input type="checkbox"/> Supplemental Declaration |
| <input type="checkbox"/> No additional fee | |
| <input checked="" type="checkbox"/> Other: Issue Fee Transmittal and Change of Correspondence Address | |

CLAIMS AS AMENDED BY LARGE ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS		MINUS			X 50	
INDEP. CLAIMS		MINUS			X 200	
[] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$360	\$
EXTENSION FEE	1ST MONTH \$120	2ND MONTH \$450	3RD MONTH \$1,020	4TH MONTH \$1,590	\$	
					TOTAL FEE FOR THIS AMENDMENT	\$

- ☐ Attached is a check for \$ _____.
- ☒ Please charge to Deposit Account 50-1491 the amount of \$1030.00.

At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-1491 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 50-1491 under 37 CFR 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being facsimile transmitted to the USPTO (571-273-2885) under CFR 1.8 on the date listed below:
Date of Transmission: November 17, 2005

Signature: Kathy M. Manke
Typed Name: Kathy M. Manke

Respectfully submitted,

By: William W. Cochran
William W. Cochran
Attorney for Applicant(s)
Reg. No.: 26652
Telephone No.: (970) 492-1100
Date: November 17, 2005